NPDES DISCHARGE PERMIT APPLICATION FOR STORMWATER ASSOCIATED WITH INDUSTRIAL ACTIVITY

WASHINGTON NAVY YARD

WASHINGTON, DC

Prepared For:

NAVAL FACILITIES, WASHINGTON

Engineer-In-Charge: Walter Marx, P.E.

Contract No.: N62477-02-D-0082
Delivery Order: 017

September 2005

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WASHINGTON NAVY YARD NPDES PERMIT APPLICATION
NPDES PERMIT #DC0000141

TABLE OF CONTENTS

Form Approved. OMB No. 2040-0086

FORM 1 GENERAL

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER: F DC0000141 D

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK "X" YES	MARK "X" NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)	X		
B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store or dispose of hazardous wastes? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons?	X		
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act, and may affect or be located in an attainment area? (FORM 5)	X		
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP Washington Navy Yard

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 Grigg, Krista L	202 433 6710

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 1014 N. Street SE Suite 320

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 Washington	DC	20374

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 1014 N. Street SE Suite 320

B. COUNTY NAME

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE
6 Washington	DC	20374	

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
9711 National Security, Navy	
C. THIRD	**D. FOURTH**

VIII. OPERATOR INFORMATION

A. NAME	B. Is the name listed in Item VIII-A also the owner?
Washington Navy Yard	X YES NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)
F

D. PHONE (area code & no.)

E. STREET OR P.O. BOX
1014 N. Street SE Suite 320

F. CITY OR TOWN	G. STATE	H. ZIP CODE
Washington	DC	20374

IX. INDIAN LAND
Is the facility located on Indian land?
☐ YES X NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
N DC0000141	P DC007
B. UIC (Underground Injection of Fluids)	**E. OTHER (specify)**
U	
C. RCRA (Hazardous Wastes)	**E. OTHER (specify)**
R	

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

WNY consists of administrative, supply and storage buildings, residences, training facilities, and museums. Approximately 12,000 employees work at the Navy Yard each day, and approximately 60 persons are permanent residents.

XIII. CERTIFICATION (see instructions)

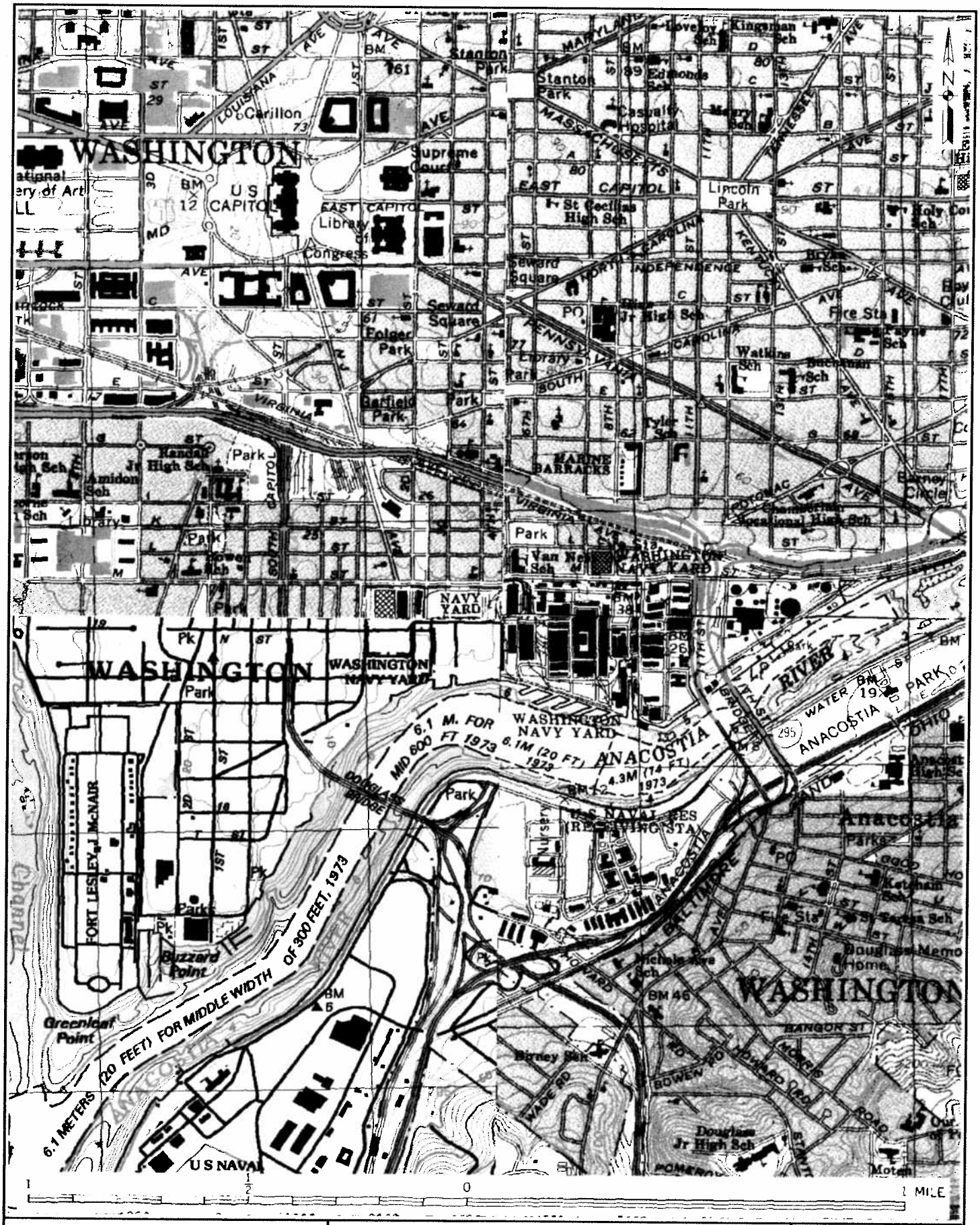
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
CAPT George Chamberlain, Commanding Officer		14 OCT 2005

COMMENTS FOR OFFICIAL USE ONLY

C

EPA Form 3510-1 (8-90)



AH Environmental Consultants

LOCATION MAP
NPDES PERMIT APPLICATION
Washington Navy Yard, Washington D.C.

Figure 1

Please print or type in the unshaded areas only

EPA I.D. NUMBER (*copy from item 1 of Form 1*)
DC0000141

Form Approved OMB No. 2040-0086
Approval expires 5-31-92

FORM [illegible]

United States Environmental Protection Agency
Washington, DC 20460

Application for Permit To Discharge Stormwater Discharges Associated with Industrial Activity

Paperwork Reduction Act Notice

Public reporting burden for this application is estimated to average 28.6 hours per application, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate, any other aspect of this collection of information, or suggestions for improving this form, including suggestions which may increase or reduce this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., SW, Washington, DC 20460, or Director, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

I. Outfall Location

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. Outfall Number (*List*)	B. Latitude	C. Longitude	D. Receiving Water (name)
	See Table 2F-I.		

II. Improvements

A. Are you now required by any Federal, State, or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

dentification of Conditions, Agreements, Etc.	2. Affected Outfalls		3. Brief Description of Project	4. Final Compliance Date	
	number	source of discharge		a. req	b. proj
	See Table 2F-II.A.				

B. You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate you actual or planned schedules for construction.

III. Site Drainage Map

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfall(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each stormwater outfall; paved areas and [illegible]ngs within the drainage area of each storm water outfall, each known past or present areas used for outdoor storage or disposal of significant [illegible]als, each existing structural control measure to reduce pollutants in stormwater, runoff materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which receive storm water discharges from the facility.

Continue on Page 2

Table 2F-I.

Outfall Number	Latitude			Longitude			Receiving Water
	Deg	Min	Sec	Deg	Min	Sec	
001	38	52	19	76	59	29	Anacostia River
005	38	52	18	76	59	41	Anacostia River
006	38	52	18	76	59	43	Anacostia River
007	38	52	18	76	59	45	Anacostia River
008	38	52	20	76	59	49	Anacostia River
009	38	52	21	76	59	53	Anacostia River
013	38	52	16	76	59	34	Anacostia River
014	38	52	22	76	59	39	Anacostia River
CSO-14F	38	52	29	76	59	57	Anacostia River
CSO-15G	38	52	23	76	59	37	Anacostia River
CSO-15H	38	52	28	76	59	37	Anacostia River
MS4-001E	38	52	23	76	59	53	Anacostia River

Table 2F-II.A

Identification of Condition, Agreement, etc.	Affected Outfalls		Brief Description of Project	Final Compliance Date	
	a. No.	b. Source of Discharge		a. Required	b. Projected
NPDES Permit	WNY 001 WNY 005 WNY 006 WNY 007 WNY 008 WNY 009 WNY 013 WNY 014	Storm water Storm water Storm water Storm water Storm water Storm water Storm water Storm water	Mixing Zone Study WNY is required to perform a mixing zone study to determine the location where discharges of dissolved metals can mix with the Anacostia River and not exceed water quality standards.		Finalized September 2004
Federal Facility Agreement	WNY 001 WNY 005 WNY 006 WNY 007 WNY 008 WNY 009 WNY 013 WNY 014 DC 001 DC 002 DC 014 DC 015	Storm water Storm water Storm water Storm water Storm water Storm water Storm water Storm water Storm water Storm water Storm water Storm water	Storm Sewer Rehabilitation WNY is required to rehabilitate its storm sewer system.		Project Closeout Novemeber 2001
NPDES Permit	WNY 001 WNY 005 WNY 006 WNY 007 WNY 008 WNY 009 WNY 013 WNY 014 DC 001 DC 014 DC 015	Storm water Storm water Storm water Storm water Storm water Storm water Storm water Storm water Storm water Storm water Storm water	BOD Reduction Plan WNY is required to reduce its BOD loading by 50% from the 1998 baseline amount within 1.25 years of permit issuance or submit a BOD Reduction Plan to the EPA and implement the Plan as part of its SWPPP.		June 2002

Continued From the Front

IV. Narrative Description of Pollutant Sources

For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
	See Table 2F-IV.A				

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to stormwater; method of treatment, storage, or disposal; past and present materials management practices employed, in the last three years, to minimize contact by these materials with storm water runoff; materials loading and access areas, and the location, manner, and frequency in which pesticides, herbicides, soil conditioner, and fertilizers are applied.

Pesticides-Liquid sprayed in 2 locations for rat control on an as needed basis.
Herbicides-Liquid sprayed 1 to 2 times per year in the spring to control weeds.
Soil conditioners-No soil conditioners are appled at the Washington Navy yard.
Fertilizer-A granual type of fertilizer is applied 1 to 2 times per year in the fall to the grassed areas. It is applied with a mechanicl spreader.

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in stormwater runoff; and a description of the treatment the stormwater receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

ıll ıer	Treatment	List Codes from Table 2F-1
	See Table 2F-IV.C.	

V. Nonstormwater Discharges

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of nonstormwater discharges, and that all nonstormwater discharges from these outfall(s) are identified in either an accompanying Form 2C or Form 2E application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed

B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

The entire storm sewer system was rehabilitated and cleaned. Close out report lists 21,040 linear feet cleaned, 9,100 linear feet lined using cure-in-place liner, 11,400 linear feet was replaced or newly installed. TV inspection was done before and after cleaning and rehabilitation for a total of 44,600 linear feet.

VI. Significant Leaks or Spills

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

April 25, 2003 Approximately 1/2 gallon of diesel fuel found in a 50 yard long & 3 feet wide streak in the Anacostia River. The fuel was cleaned up by the Washington Navy Yard using absorbant material. The origin of the spill is unknown.

Table 2F-IV.A.

Outfall Number	Area of Impervious Surface	Total Area Drained
001	2.9 acres	3.0 acres
005	2.8 acres	2.9 acres
006	1.37 acres	1.4 acres
007	2.8 acres	2.9 acres
008	8.3 acres	9.4 acres
009	4.3 acres	4.7 acres
013	4.7 acres	4.8 acres
014	3.6 acres	5.1 acres
CSO-14F	3.9 acres	4.0 acres of Navy property plus additional contributions from off site
CSO-15G	13.7 acres	14 acres of Navy property plus additional contributions from off site
CSO-15H	13.7 acres	14 acres of Navy property plus additional contributions from off site
MS4-001E	13.3 acres	14 acres of Navy property plus additional contributions from off site

Table 2F-IV.C.

Outfall Number	Structural Controls	List Codes from Table 2F-1
001	Bioretention cell in General Parking Area	4-A
	Bioretention cell in General Parking Area	4-A
	Permeable paver in General Parking Area	4-A
	Permeable paver in General Parking Area	4-A
005	Permeable paver in Ceremonial parking Area	4-A
006	Permeable paver in Ceremonial Parking Area	4-A
	Bioretention cell in Ceremonial Parking Area	4-A
	Bioretention cell south of Bldg 292	4-A
	Rain barrel south east corner of Bldg 292	4-A
007	NA	4-A
008	Permeable paver north of Bldg 22	4-A
	Permeable paver east of Bldg 22	4-A
	Rain garden east of Bldg 76	4-A
	Sand Filter No. 5 along Patterson Ave east of parking structure	4-A
	Sand Filter No. 8 south east corner of Bldg 201	4-A
009	NA	4-A
013	NA	4-A
014	Tree box northeast corner of Bldg 58	4-A
CSO-14F	NA	4-A
CSO-15G	NA	4-A
CSO-15H	Rain barrel northwest corner of Bldg 169	4-A
MS4-001E	Sand Filter No. 1 northeast corner of Warrington Ave and Isaac Hull Ave	4-A
	Sand Filter No. 2 on Isaac Hull Ave south of Bldg 199	4-A
	Sand Filter No. 4 on Isaac Hull Ave east of Bldg 197	4-A
	Sand Filter No. 5 on Isaac Hull Ave east of Bldg 197	4-A
	Sand Filter No. 9 southeast corner of Bldg 197	4-A

EPA I.D. NUMBER (*copy from item 1 of Form 1*)
DC0000141

VII. Discharge Information

A, B, C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided. Tables VII-A, VII-B, and VII-C are included on separate sheets numbered VII-1 and VII-2.

E. Potential discharges not covered by analysis - is any pollutant listed in Table 2F-2 a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

[ ] Yes *(list all such pollutants below)* [X] No *(go to Section IX)*

VIII. Biological Toxicity Testing Data

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

[ ] Yes *(list all such pollutants below)* [X] No *(go to Section IX)*

IX. Contract Analysis Information

Were any of the analyses reported in item V performed by a contract laboratory or consulting firm?

[X] Yes *(list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)* [ ] No *(go to Section X)*

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed
Martel Laboratories, Inc.	1025 Cromwell Bridge Rd. Baltimore, MD 21286	(410) 825-7790	

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. Name & Official Title (*type or print*)	B. Area Code and Phone No.
CAPT George Chamberlain, Commanding Officer	(202) 433-3495
C. Signature	D. Date Signed
	14 OCTOBER 2005

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)
DC0000141

Form Approved OMB No. 2040-0086
Approval expires 5-31-92

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	001 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease						
Biological Oxygen Demand (BOD_5)	62 mg/l		13.79 mg/l		19	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)	3,100 mg/l		179.95 mg/l		19	
Total Kjeldahl Nitrogen	3.9 mg/l		1.67 mg/l		16	
Nitrate plus Nitrite Nitrogen	1.9 mg/l		0.68 mg/l		16	
Total Phosphorus	3.50 mg/l		0.30 mg/l		19	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	001 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	001 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Lead	2,400.00 ug/l		136.82 ug/l		19	
Chromium	100.0 ug/l		7.29 ug/l		19	
Copper	140.0 ug/l		34.52 ug/l		19	
Zinc	4,300.0 ug/l		351.9 ug/l		19	
Arsenic	42.0 ug/l		95% ND		19	
Fecal Coliform	11,000 org/100 ml		1,162 org/ml		19	
Total Nitrogen	12.00 mgN/l		2.09 mgN/l		15	
Mecury	5.9 ug/l		89% ND		19	
PCB-1242	ND		ND		22	
PCB-1254	ND		ND		22	
PCB-1221	ND		ND		22	
PCB-1232	ND		ND		22	
PCB-1248	ND		ND		19	
PCB-1260	ND		ND		22	
PCB-1016	ND		ND		22	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)
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VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	013 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease						
Biological Oxygen Demand (BOD_5)	55.0 mg/l		10.95 mg/l		19	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)	12,000.0 mg/l		151 mg/l*		18	*Average without 12,000 mg/l out-lier.
Total Kjeldahl Nitrogen	5.2 mg/l		1.9 mg/l		16	
Nitrate plus Nitrite Nitrogen	1.6 mg/l		0.57 mg/l		16	
Total Phosphorus	3.90 mg/l		0.45 mg/l		19	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	013 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	013 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Lead	1,400 ug/l		91.28 ug/l		20	
Chromium	210.0 ug/l		14.33 ug/l		20	
Copper	850.0 ug/l		66.39 ug/l		20	
Zinc	5,800.0 ug/l		432.90 ug/l		20	
Arsenic	16.0 ug/l		90 % ND		20	
Fecal Coliform	11,000 org/100 ml		1,128 org/100 ml		19	
Total Nitrogen	6.8 mgN/l		1.57 mgN/l		15	
Mercury	2.0 ug/l		94 % ND		17	
PCB-1242	ND		ND		22	
PCB-1254	ND		ND		22	
PCB-1221	ND		ND		22	
PCB-1232	ND		ND		22	
PCB-1248	ND		ND		19	
PCB-1260	ND		ND		22	
PCB-1016	ND		ND		22	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from item 1 of Form 1*)
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VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	014 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease	6.00 mg/l		2.01 mg/l		21	
Biological Oxygen Demand (BOD_5)	87.00 mg/l		13.36 mg/l		22	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)	130.0 mg/l		24.34mg/l		22	
Total Kjeldahl Nitrogen	4.5 mg/l		1.55 mg/l		19	
Nitrate plus Nitrite Nitrogen	1.6 mg/l		0.75 mg/l		19	
Total Phosphorus	0.34 mg/l		0.14 mg/l		22	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	014 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

VII. Discharge Information ***(Continued from page 3 of Form 2F)***

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	014 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Lead	203.0 ug/l		45.61 ug/l		23	
Copper	1500.0 ug/l		314.43 ug/l		23	
Zinc	420.0 ug/l		187.04 ug/l		23	
Nickel	9.0 ug/l		2.72 ug/l		22	
Arsenic	ND		ND		23	
Beryllium	ND		ND		22	
Cadmium	0.60 ug/l		96% ND		22	
Fecal Coliform	24,000 org/100 ml		3,464 org/100 ml		22	
Total Nitrogen	5.80 mgN/l		1.52 mgN/l		18	
Mercury	ND		ND		23	
PCB-1242	ND		ND		25	
PCB-1254	ND		ND		25	
PCB-1221	ND		ND		25	
PCB-1232	ND		ND		25	
PCB-1248	ND		ND		22	
PCB-1260	ND		ND		25	
PCB-1016	ND		ND		25	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)
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Form Approved OMB No. 2040-0086
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VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	005 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease						
Biological Oxygen Demand (BOD_5)	26.00 mg/l		9.93 mg/l		15	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)	480.0 mg/l		108.00 mg/l		15	
Total Kjeldahl Nitrogen	3.6 mg/l		1.83 mg/l		11	
Nitrate plus Nitrite Nitrogen	1.2 mg/l		0.55 mg/l		11	
Total Phosphorus	0.80 mg/l		0.26 mg/l		15	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	005 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	005 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Lead	4,740.00 ug/l		724.67 ug/l		15	
Copper	540.00 ug/l		227.53 ug/l		15	
Zinc	1,300.00 ug/l		372.13 ug/l		15	
Arsenic	7.00 ug/l		3.02 ug/l		15	
Fecal Coliform	2,400 org/100 ml		565 org/100 ml		15	
Total Nitrogen	3.90 mgN/l		1.59 mgN/l		11	
Mercury	ND		ND		15	
PCB-1242	ND		ND		18	
PCB-1254	ND		ND		18	
PCB-1221	ND		ND		18	
PCB-1232	ND		ND		18	
PCB-1260	ND		ND		18	
PCB-1016	ND		ND		18	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from Item 1 of Form 1*)

DC0000141

Form Approved OMB No. 2040-0086
Approval expires 5-31-92

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	006 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease						
Biological Oxygen Demand (BOD_5)	23.00 mg/l		3.57 mg/l		20	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)						
Total Kjeldahl Nitrogen	1.8 mg/l		1.35 mg/l (78% ND)		18	
Nitrate plus Nitrite Nitrogen	2.9 mg/l		0.86 mg/l		18	
Total Phosphorus	0.37 mg/l		0.16 mg/l		20	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	006 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

Continued from the Front

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	006 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Lead	120.00 ug/l		24.41 ug/l		21	
Copper	293.00 ug/l		83.93 ug/l		21	
Zinc	120.00 ug/l		40.50 ug/l		21	
Arsenic	5.00 ug/l		>95% ND		21	
Fecal Coliform	4,600 org/100 m		566 org/100 ml		19	
Total Nitrogen	4.70 mgN/l		1.39 mgn/l		16	
Mercury	ND		ND		21	
PCB-1242	ND		ND		22	
PCB-1254	ND		ND		22	
PCB-1221	ND		ND		22	
PCB-1232	ND		ND		22	
PCB-1260	ND		ND		22	
PCB-1016	ND		ND		22	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from item 1 of Form 1*)

DC0000141

Form Approved OMB No. 2040-0086
Approval expires 5-31-92

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	007 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease						
Biological Oxygen Demand (BOD_5)	25.00 mg/l		4.20 mg/l		20	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)	47.00 mg/l		17.20 mg/l		20	
Total Kjeldahl Nitrogen	1.7 mg/l		1.2 mg/l (78%ND)		17	
Nitrate plus Nitrite Nitrogen	3.6 mg/l		1.03		17	
Total Phosphorus	0.30 mg/l		0.12 mg/l		20	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	007 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	007 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Copper	760.00 ug/l		83.70 ug/l		21	
Zinc	294.00 ug/l		56.28 ug/l		21	
Nickel	60.00 ug/l		5.70 ug/l		21	
Arsenic	6.00 ug/l		2.49 ug/l (76% ND)		21	
Beryllium	0.73 ug/l		95% ND		21	
Cadmium	0.60 ug/l		95% ND		21	
Total Nitrogen	3.70 mgN/l		1.28 mgN/l		16	
Mercury	ND		ND		21	
PCB-1242	ND		ND		23	
PCB-1254	ND		ND		23	
PCB-1221	ND		ND		23	
PCB-1232	ND		ND		23	
PCB-1248	ND		ND		20	
PCB-1260	ND		ND		23	
PCB-1016	ND		ND		23	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from item 1 of Form 1*)

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Form Approved OMB No. 2040-0086
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VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	008 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease						
Biological Oxygen Demand (BOD_5)	97.0 mg/l		13.5 mg/l		14	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)	620.00 mg/l		74.32 mg/l		14	
Total Kjeldahl Nitrogen	5.8 mg/l		2.22 mg/l		13	
Nitrate plus Nitrite Nitrogen	2.2 mg/l		0.63 mg/l		13	
Total Phosphorus	1.60 mg/l		0.26 mg/l		14	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	008 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

Continued from the Front

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	008 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Lead	280.00 ug/l		92.57 ug/l		15	
Copper	490.00 ug/l		207.27 ug/l		15	
Zinc	280.00 ug/l		117.25 ug/l		15	
Arsenic	2.10 ug/l		93% ND		15	
Cadmium	ND		ND		15	
Silver	1.20 ug/l		93% ND		15	
Fecal Coliform	11,000 org/100 ml		1,380 org/100 ml		14	
Total Nitrogen	6.07 mgN/l		2.00 mgN/l		11	
Mercury	ND		ND		15	
PCB-1242	ND		ND		15	
PCB-1254	ND		ND		15	
PCB-1221	ND		ND		15	
PCB-1232	ND		ND		15	
PCB-1248	ND		ND		14	
PCB-1260	ND		ND		15	
PCB-1016	ND		ND		15	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from item 1 of Form 1*)
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VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	009 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease	3.00 mg/l		2.03 mg/l		20	
Biological Oxygen Demand (BOD_5)	65.00 mg/l		21.77 mg/l		20	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)	210.0 mg/l		44.05 mg/l		20	
Total Kjeldahl Nitrogen	2.5 mg/l		1.64 mg/l (71% ND)		17	
Nitrate plus Nitrite Nitrogen	2.2 mg/l		0.51 mg/l		17	
Total Phosphorus	0.24 mg/l		0.14 mg/l		20	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	009 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

Continued from the Front

VII. Discharge Information ***(Continued from page 3 of Form 2F)***

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	009 Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Lead	22.90 ug/l		4.95 ug/l		21	
Chromuim	12.10 ug/l		90% ND		21	
Copper	180.00 ug/l		12.66 ug/l		21	
Zinc	135.00 ug/l		22.13 ug/l		21	
Nickel	45.60 ug/l		6.08 ug/l		21	
Antimony	5.0 ug/l		95% ND		21	
Arsenic	ND		ND		21	
Berylluim	ND		ND		21	
Cadmuim	ND		ND		21	
Silver	1.10 ug/l		95% ND		21	
Fecal Coliform	500 org/100 ml		35 org/100 ml		20	
Total Nitrogen	4.10 mgN/l		0.83 mgM/l		16	
Mercury	ND		ND		21	
PCB-1242	ND		ND		23	
PCB-1254	ND		ND		23	
PCB-1221	ND		ND		23	
PCB-1232	ND		ND		23	
PCB-1248	ND		ND		20	
PCB-1260	ND		ND		23	
PCB-1016	ND		ND		23	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from item 1 of Form 1*)
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Form Approved OMB No. 2040-0086
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VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	001E Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease						
Biological Oxygen Demand (BOD_5)	24.00 mg/l		5.05 mg/l		21	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)						
Total Kjeldahl Nitrogen	1.9 mg/l		1.35 mg/l		18	
Nitrate plus Nitrite Nitrogen	1.8 mg/l		0.68 mg/l		18	
Total Phosphorus	0.61 mg/l		0.18 mg/l		21	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	001E Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

Continued from the Front

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	001E Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Lead	93.00 ug/l		86% ND		22	
Copper	400.00 ug/l		30.63 ug/l		22	
Zinc	640.00 ug/l		51.77 ug/l		22	
Arsenic	ND		ND		21	
Fecal Coliform	24,000 org/100 ml		1,660 org/100 ml		21	
Total Nitrogen	3.4 mgN/l		1.20 mgN/l		16	
Mercury	ND		ND		20	
PCB-1242	ND		ND		24	
PCB-1254	ND		ND		24	
PCB-1221	ND		ND		24	
PCB-1232	ND		ND		24	
PCB-1248	ND		ND		21	
PCB-1260	ND		ND		24	
PCB-1016	ND		ND		24	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from item 1 of Form 1*)

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VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	014F Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease						
Biological Oxygen Demand (BOD_5)	11.00 mg/l		4.18 mg/l		4	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)	8.40 mg/l		4.13 mg/l		3	
Total Kjeldahl Nitrogen	0.6 mg/l		0.6 mg/l		3	
Nitrate plus Nitrite Nitrogen	0.72 mg/l		0.44 mg/l		3	
Total Phosphorus	0.22 mg/l		0.11 mg/l		4	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	014F Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

VII. Discharge Information ***(Continued from page 3 of Form 2F)***

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	014F Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Copper	27.00 ug/l		12.77 ug/l		4	
Zinc	60.00 ug/l		39.45 ug/l		4	
Arsenic	ND		ND		4	
Fecal Coliform	23 org/100 ml		23 org/100 ml		4	
Total Nitrogen	0.62 mgN/L		0.58 mgN/L		3	
PCB-1242	ND		ND		4	
PCB-1254	ND		ND		4	
PCB-1221	ND		ND		4	
PCB-1232	ND		ND		4	
PCB-1248	ND		ND		4	
PCB-1260	ND		ND		4	
PCB-1016	ND		ND		4	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from item 1 of Form 1*)
DC0000141

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VII. Discharge Information ***(Continued from page 3 of Form 2F)***

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	015G Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease						
Biological Oxygen Demand (BOD_5)	83.00 mg/l		15.25 mg/l		21	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)	110.00 mg/l		24.46 mg/l		21	
Total Kjeldahl Nitrogen	11.00 mg/l		4.4 mg/l		18	
Nitrate plus Nitrite Nitrogen	6.7 mg/l		1.39 mg/l		18	
Total Phosphorus	0.50 mg/l		0.19 mg/l		21	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	015G Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	015G Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Lead	26.00 ug/l		10.87 ug/l		22	
Copper	270.00 ug/l		36.89 ug/l		22	
Zinc	210.00 ug/l		89.20 ug/l		22	
Arsenic	28.00 ug/l		4.60 ug/l		22	
Fecal Coliform	70,000 org/100 ml		6,623 org/100 ml		21	
Total Nitrogen	18.00 mgN/l		2.60 mgN/l		16	
PCB-1242	ND		ND		24	
PCB-1254	ND		ND		24	
PCB-1221	ND		ND		24	
PCB-1232	ND		ND		24	
PCB-1248	ND		ND		21	
PCB-1260	ND		ND		24	
PCB-1016	ND		ND		24	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
N/A							

9. Provide a description of the method of flow measurement or estimate.

N/A

EPA I.D. NUMBER (*copy from item 1 of Form 1*)

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VII. Discharge Information *(Continued from page 3 of Form 2F)*

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	015H Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Oil and Grease	13.00 mg/l		3.26 mg/l		21	
Biological Oxygen Demand (BOD_5)	64.00 mg/l		10.89 mg/l		20	
Chemical Oxygen Demand (COD)						
Total Suspended Solids (TSS)	270.00 mg/l		37.11 mg/l		20	
Total Kjeldahl Nitrogen	2.00 mg/l		1.46 mg/l		18	
Nitrate plus Nitrite Nitrogen	2.3 mg/l		0.90 mg/l		18	
Total Phosphorus	0.39 mg/l		0.18 mg/l		21	
pH	Minimum	Maximum	Minimum	Maximum		

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	015H Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
N/A						

VII. Discharge Information ***(Continued from page 3 of Form 2F)***

Part C - List each pollutant

Pollutant and CAS Number *(if available)*	Maximum Values *(include units)*		Average Values *(include units)*		Number of Storm Events Sampled	015H Sources of Pollutants
	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-weighted Composite		
Lead	93.20 ug/l		23.52 ugl		22	
Chromium	13.00 ug/l		4.61 ug/l		22	
Copper	382.00 ug/l		130.96 ug/l		22	
Zinc	960.00 ug/l		261.00 ug/l		22	
Nickel	11.00 ug/l		3.25 ug/l		22	
Antimony	ND		ND		22	
Arsenic	ND		ND		22	
Berylluim	ND		ND		22	
Cadmium	1.90 ug/l		0.44 ug/l		22	
Silver	3.10 ug/l		0.30 ug/l		21	
Fecal Coliform	50,0000 org/100 ml		4.320 org/l00ml		22	
Mercury	ND		ND		24	
PCB-1242	ND		ND		24	
PCB-1254	ND		ND		24	
PCB-1221	ND		ND		24	
PCB-1232	ND		ND		24	
PCB-1248	ND		ND		21	
PCB-1260	ND		ND		24	
PCB-1016	ND		ND		24	

Part D - Provide data for the storm events(s) which resulted in the maximum values for the flow weighted composite sample.

1. Date of Storm Event	2. Duration of Storm *(in minutes)*	3. Total rainfall during storm event *(in inches)*	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event *(gallons/minute or specify units)*	6. Total flow from rain event *(gallons or specify units)*	7. Season sample was taken	8. Form of Precipitation *(rainfall, snowmelt)*
		N/A					

9. Provide a description of the method of flow measurement or estimate.

N/A